

Placer Local Agency Formation Commission
145 Fulweiler Ave, Suite 110, Auburn CA 95603
(530) 889-4097 FAX: (530) 886-4671

APPLICATION FOR PUBLIC MEMBER/
ALTERNATE PUBLIC MEMBER

Name: _____

Residence Address: _____

Residence Telephone Number: _____

E-Mail Address: _____

Employer: _____

Business Address: _____

Business Telephone Number and Fax Number: _____

I am applying for the position of (check as appropriate):

___ Public Member

___ Alternate Public Member

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Please briefly describe your experience in local government and/or with local community organizations: _____

Please briefly describe your employment experience: _____

Please briefly describe your educational background: _____

On a separate page, explain why you are interested in serving on the Placer Local Agency Formation Commission, and how your appointment would be of benefit to the Commission and the community. Please do not exceed one page.

Signed: _____ Dated: _____

Applications must be received no later than 4:30 p.m. on June 25, 2007.

Thank you for your interest in the Placer Local Agency Formation Commission.